

Head Start Monitoring

New Reviewer Orientation

Mental Health Service Reviewers

April 2006



HEAD START

Topics

- Background: The Head Start Program
- *Your Role*: Monitoring Local Head Start Programs
- *Your Tool*: The Program Review Instrument for Systems Monitoring (PRISM)
- *Your Product*: Monitoring Review Reports

Head Start

An Overview



HEAD START

Head Start and Early Head Start

Purpose

- To foster school readiness of low-income pre-school children through comprehensive educational, social, health, nutritional, and psychological services.
- In 1994, the program was expanded to include Early Head Start (EHS). EHS programs are aimed at low-income infants and toddlers under the age of three, low-income pregnant teens, and their families.

Head Start Grantees

- Head Start programs are operated by community based organizations: School districts, universities, tribal governments, non-profit and for-profit organizations, community action agencies and county governments.
- Head Start programs exist in all 50 states, the District of Columbia, Puerto Rico, U.S. territories, as well as urban and rural areas.

Head Start Bureau & Regional Offices

- The Head Start Bureau (HSB)
 - Head Start programs are administered by the Head Start Bureau (HSB) within the Administration for Children and Families (ACF) at the federal level
 - The HSB awards grants directly to local community based agencies.
 - The HSB develops policy, goals and objectives for programs.
- ACF Regional Offices (RO)
 - The regional offices implement the HSB's policies and oversee local grantees.
 - There are 10 regional offices and 2 branch offices (Migrant and American Indian-Alaskan Native)

Head Start Requirements

Head Start Grantees must adhere to a set of statutes, regulations, and policies that appear in:

- Code of Federal Regulations (CFR)
- Office of Management and Budget (OMB) circulars

Your Role

Monitoring Local Grantees



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Your Role: Monitoring

Monitoring Grantee Compliance

- Section 641A(c)(1) requires the Administration for Children and Families to conduct monitoring reviews “in order to determine whether Head Start agencies meet standards...with respect to program, administrative, financial management, and other requirements[.]”

Your Role: Monitoring

Monitoring Grantee Compliance (cont'd)

- Monitoring informs program improvement
...
 - Reviews provide objective, evidenced-based information to help grantees understand identified program weaknesses.
- And strengthens services provided to and for children and their families

What is PRISM?

Program Review Instrument for System Monitoring (PRISM)

- Provides guidelines to follow when conducting a federal review of the Head Start and Early Head Start programs.
- Gives reviewers tools that guide and organize data gathering during the on-site monitoring review.
 - This instrument is available in two forms:
 - Paper
 - PRISM Software

Type of Monitoring Reviews

- Triennial Reviews
 - A full review of each grantee is completed at least once every three years.
- First Year Reviews
 - A full review is completed immediately after the program's first year in operation.
- Other Reviews
 - As appropriate

Follow-up Reviews

- Return visits made to grantees that fail to meet program performance standards and regulations.

Make-up of the Review Team

- Federal Team Leaders (FTL)
 - Staff from the ACF Regional Offices that lead the review team.
 - Manage review activities, supervise team meetings, and ensure development of a quality review report.
- Report Coordinators (RC)
 - A reviewer responsible for producing a preliminary quality report describing the findings from the on-site review.
- Reviewers
 - Qualified individuals with expertise in various Head Start content areas (e.g. mental health) who collect “evidence” about program compliance and write preliminary areas of noncompliance based on that evidence.

The PRISM Phases

Head Start monitoring occurs in four phases. These phases are:

1. Advance Activities

- Planning and coordinating review logistics (FTLs)
- Reviewing of grantee background documents (Review team)

2. On-Site Activities (the “on-site review”)

- Attending review team meetings
- Collecting and verifying information
- Gathering and handwritten notes, checklists, observation forms, and protocols
- Producing the preliminary Head Start Review Report, which documents the teams findings

The PRISM Phases (cont'd)

3. Grantee Notice: The Head Start Review Report
 - This report is the official product of the on-site review
 - After the review, Reviewers may obtain an electronic copy of the official Head Start Review Report by sending a request to headstartreviews@danya.com
4. Program Improvement and Corrective Action
 - ACF schedules a Follow-up Review to ascertain that the grantee has corrected deficiencies and/or compliances.

PRISM: The Systems Approach

- PRISM employs a systems approach to monitoring which requires that reviewers evaluate the Head Start program to confirm that systems are functioning smoothly to allow for the delivery of Head Start services.

PRISM: The Systems Approach

- There are two types of reviewers:
 - Service Reviewers
 - Examine grantee service delivery and partnership activities.
 - Examine interrelationships between services and systems.
 - System Reviewers
 - Examine information related to management systems and governance
 - Examine interrelationships between services and systems.

Your Role: Monitoring

Mental Health Reviewers

Mental Health Reviewers are service reviewers. They:

- Have expertise in mental health and have dedicated the time to assess a program's compliance with the mental health performance standards.
- Understand the Head Start Performance Standards pertaining to mental health and the other systems that help support the grantee's mental health services.
- Are able to make connections between systems and services through effective ongoing collaboration with other reviewers on the team.
- Are able to assist other reviewers with answering questions that may relate to mental health services, which could help them complete their work.
- Possess good analytical and writing skills to translate observations into prose that effectively describe the non-compliances, supported by sufficient evidence.

Your Tool

The PRISM Instrument and Software



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Your Tool: The PRISM Instrument

- The PRISM Instrument tools guide reviewers through the primary requirements of some service areas.
- Concerns identified through use of these tools can be used as “evidence” for a preliminary area of noncompliance
- Preliminary areas of noncompliance are entered into the Core Questions.
- The PRISM Instrument is also available in electronic form in the PRISM 2006 Software

Your Tool: The PRISM Instrument

What Tools Are in the Instrument?

- Protocols
- Interview Guides
- Checklists
- Observation Instruments

Your Tool: The PRISM Instrument

The Tools and the Core Questions

COLLECT EVIDENCE

Protocols, Checklists,
Observation Instruments, Interview Guides



DOCUMENT ISSUES

Core Question

The Core Questions

- Core Questions
 - A set of questions that together make up the framework for monitoring grantee compliance.
 - Preliminary areas of noncompliance are entered into the appropriate core question

Your Tool: The PRISM Instrument

The Core Questions

- 9 Core Questions focus on a program's implementation of Head Start services and partnerships.
- 9 Core Questions focus on the effectiveness of the systems in place to support delivery of services

Your Tool: The PRISM Instrument

The Core Questions

Core Questions that Focus on Systems

1. Program Governance
2. Planning
3. Communication
4. Record Keeping and Reporting
5. Ongoing Monitoring
6. Program Self-Assessment
7. Human Resources
8. Fiscal Management
17. Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA)

Core Questions that Focus on Services and Partnerships

- 9a. Prevention and Early Intervention for Health and Nutrition
- 9b. Managing Health and Nutrition Services
10. Individualization
11. Mental Health
12. Disabilities
13. Curriculum and Assessment
14. Family Partnership Building
15. Parent Involvement
16. Community Partnerships
18. Facilities, Materials, Equipment, and Transportation

Components of the Core Questions

1. The Core Question Itself

- The Mental Health Core Question: How does the grantee implement a comprehensive system of mental health prevention and intervention to children and families, including providing mental health awareness and education to staff?

2. Performance Standards and Other Regulations

- These are the specific citations for which mental health reviewers will assess grantee compliance.
- Standards include:
 - ▶ Parts 1304.20, 1304.21, 1304.40

3. Bulleted Items

- Suggest data collection methods and strategies.

The Mental Health Core Question

- Ensures mental health services are thoroughly reviewed.
- Brings increased awareness to mental health in HS/EHS.
- Increases program accountability in mental health.

QUESTION 11. MENTAL HEALTH

STANDARDS

How does the grantee implement a comprehensive system of mental health prevention and intervention to children and families, including providing mental health awareness and education to staff?

1304.20(a)(1)(II)-1304.20(a)(1)(IV);
1304.20(b); 1304.20(c)(1); 1304.20(d);

How does the grantee ensure that:

- the program is designed and managed to ensure that the service of a mental health professional (or professionals) is on a regular schedule of sufficient frequency to ensure the timely and effective identification of and intervention in family and staff concerns about a child?
- other community mental health resources are used as needed?
- each child receives an appropriate and timely (within 45 days of the child's entry into the program) screening to identify, using multiple sources of information, and address any behavioral, social, emotional concerns?
- the staff work with parents to discuss and identify appropriate responses to their children's behavior including how to strengthen nurturing, supportive environments and relationships in the home and at the program?
- parents receive mental health education on issues that place families at risk (including, for pregnant women, education and referrals if needed for maternal depression and substance abuse) and other appropriate intervention, including opportunities to participate in counseling programs?
- parents, program staff and the mental health professional design and implement program practices that are responsive to the identified behavioral and mental health concerns of an individual or group of children including providing special help to children with atypical behavior?

1304.20(a)(2)-1304.20(a)(3);
1304.20(f)(1); 1304.21(a)(3)(I);
1304.21(b)(1)(i)-1304.21(b)(1)(ii);
1304.21(b)(2)(i);
1304.21(c)(1)(ii)-1304.21(c)(1)(iv);
1304.24; 1304.40(b);
1304.40(c)(1)(ii); 1304.40(c)(2);
1304.40(f)(1); 1304.40(f)(4);
1304.41(a)(1)-1304.41(a)(2);
1304.41(c)(1)(i); 1304.51(a)(1)(II);

- **REFER TO**—Information about mental health services gathered from the Family Group Interview.
- **OBSERVE**—Centers and/or family child care homes for evidence of supporting children's mental health needs; staff and child interactions.
- **INTERVIEW**—Relevant community partners (i.e. mental health professionals, mental health referral sources); focus families; mental health staff; family service staff; education staff and management about how the mental health plan is developed and implemented; how progress is monitored; how atypical behavioral needs are addressed; how families are involved in mental health services; how families and staff receive information related to mental health; and whether mental health services meet families expectations and circumstances.
- **REVIEW**—The Mental Health Services Protocol; the grantee's plan for mental health services; mental health contract and/or memorandum of agreements with mental health professionals or agencies if applicable; mental health professional's qualifications; child and family service records; training plan or training agendas (any evidence of training and/or educational opportunities for parents and staff re: mental health); relevant individual child or family plans (IFSPs, IEPs); and results from behavioral screenings.

Your Product

The Preliminary Review Report



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The Review Report

- Sec. 641A (d) of the Head Start Act authorizes and mandates ‘exception reporting.’
- Exception reports are reports to the grantee that “inform the agency of the deficiencies that shall be corrected.”
 - The reports should be limited to ‘exceptions’ to compliance.

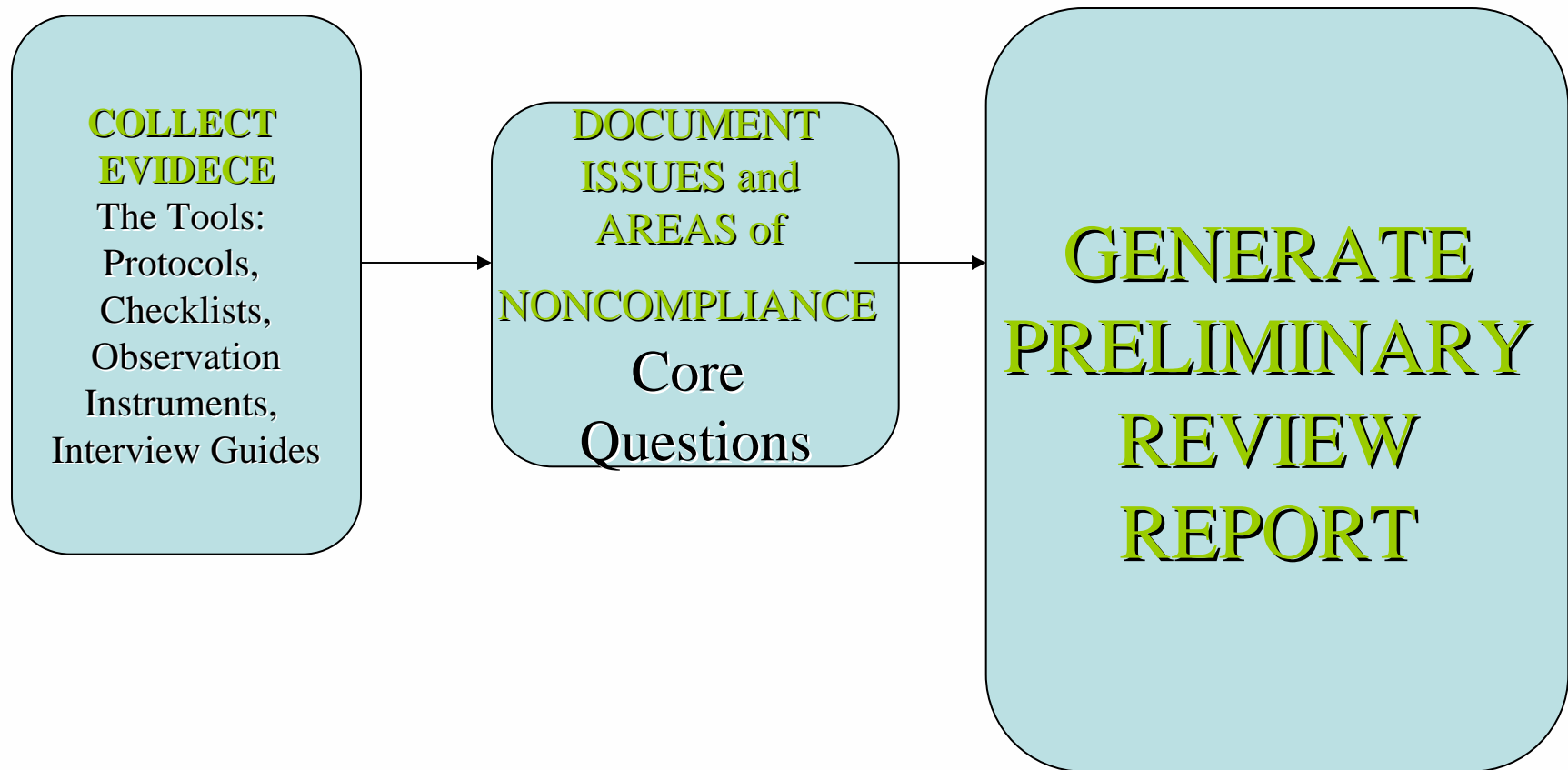
Your Product: The Review Report

Preliminary Areas of Noncompliance

- The preliminary review report is the product of the on-site phase of the review.
- Preliminary areas of noncompliance – form the basis of the Preliminary Review Report
 - Preliminary areas of noncompliance are entered into the core questions

Your Product: The Review Report

From Tools to Core Questions to the Report



The Review Report

The Review Report that is sent to grantees is made up of areas of noncompliance that include:

- the specific standards and program requirements with which the grantee is out of compliance.
- the evidence the team used to support the narrative.
 - multiple methods (e.g. observation, document review, interview)
 - multiple sources (e.g. staff, parent, Head Start Director)
- a detailed narrative description of each finding that includes evidence, methods and sources
- Program Type (Head Start, Early Head Start)

The Review Report

How can you enhance the quality of the report? Ask these questions:

- Are mental health services addressed in the self-assessment?
- Does the grantee's ongoing monitoring system take a careful look at how mental health services are provided and identify problems?
- Do the problems get corrected?
- Are the records for mental health services kept accurately and consistently?
- Does the grantee include information about mental health services in its periodic reports to the Policy Council and the Governing Body?
- Does the Grantee hire or contract qualified persons to provide mental health services?
- Does the grantee provide training opportunities for mental health staff and consultants to better understand and carry out their responsibilities?

Monitoring

Our Goal

Consistent, complete and accurate reporting that provides the grantees the opportunity to perform and sustain corrective actions leading to service improvement and improved outcomes for Head Start families.